INTRODUCTION

Purpose

The 1992 amendments to the Lanterman Developmental Disabilities Services Act¹ (Lanterman Act) require a person-centered approach to Individual Program Plans (IPPs) for individuals with developmental disabilities (consumers). The basic requirements related to IPPs in the 1992 amendments to the Lanterman Act are:

- 1) IPPs will be centered on the person and family.²
- 2) The Department of Developmental Services (the Department) will prepare a standard format for IPPs, with instructions. The format and instructions will embody an approach centered on the person and family.³
- 3) The Department will prepare training materials to implement the person-centered approach to IPPs.⁴
- *4)* To insure a person-centered approach to IPPs, each regional center shall use the standard format, instructions, and training materials prepared by the Department.⁵
- 5) All public or private agencies receiving state funds for the purpose of providing the services and supports selected through the IPP process shall respect the choices made by consumers including, but not limited to, where and with whom they live, their relationships, the way they spend their time (including education, employment and leisure

^{1.} Welfare & Institutions Code Section 4500 et. seg.

^{2.} Welfare & Institutions Code Sections 4646(a) & 4646.5(c)

^{3.} Welfare & Institutions Code Section 4646.5(c)(1)

^{4.} Welfare & Institutions Code Section 4646.5(c)(1)

^{5.} Welfare & Institutions Code Section 4646.5(c)(2)

activities) the pursuit of their personal future, and program planning and implementation. ⁶

- 6) Information needed by consumers and families to exercise their right to make the choices necessary for person-centered IPPs will be provided in an understandable form.⁷
- 7) The activities of employees of the regional centers and service providers related to person-centered IPPs, shall reflect awareness of, and sensitivity to, the lifestyle and cultural background of the consumer and family.⁸
- 8) Decisions concerning the consumer's goals, objectives, and services and supports that will be included in the IPP and purchased by the regional center, or obtained from generic agencies, shall be made jointly by the planning team at the program plan meeting. 9
- 9) The consumer or, where appropriate, their patents, legal guardian, or conservator; and a regional center representative shall sign the individual program plan prior to its implementation. ¹⁰
- 10) The IPP shall specify the approximate start dates for services and supports and shall contain timelines for actions necessary to begin services and supports, including generic services. ¹¹
- 11) The Department will monitor regional centers so that consumers will receive services and supports that have been identified in the IPP. 12

^{6.} Welfare & Institutions Code Sections 4502(j) & 4502.1

^{7.} Welfare & Institutions Code Sections 4502(j) & 4502.1

^{8.} Welfare & Institutions Code Section 4646.5(a)(1)

^{9.} Welfare & Institutions Code Section 4646(d)

^{10.} Welfare & Institutions Code Section 4646(g)

^{11.} Welfare & Institutions Code Section 4646.5(a)(4)

^{12.} Welfare & Institutions Code Section 4646.5(c)(3) & 4648.1

This resource manual is designed to fulfill the requirements of the Lanterman Act, and to facilitate the adoption of the values that lead to person-centered individual program planning. It is intended for use by all those who participate in person-centered planning. It was developed with extensive input from consumers, families, advocates and providers of service and support.

Summary

The introduction presents an overview of the person-centered approach to planning for a preferred future. The values that are essential to a person-centered approach are explained in the second section. A description of the roles and responsibilities of those involved in person-centered plan-ning is also included in the second section. The third section contains the standard format for written IPPs, with instructions and explanations.

The fourth and fifth sections of the manual contain examples of personcentered approaches to IPPs, and stories that illustrate how person-centered planning has been done in specific instances. These sections provide useful ideas for those engaged in person-centered planning.

Training guidelines are found in the sixth section. These training guidelines are intended for use by teams of trainers that may include consumers, families, service coordinators and providers of service and support.

A pocket guide to person-centered planning is available separately. The pocket guide is a paraphrased version of the material from the first three sections of this manual. The purpose of the pocket guide is to provide a brief overview of the person-centered IPP process. This guide was prepared by Bill Allen, of Allen, Shea & Associates, and is written in a

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style that is easy to read.

A glossary of the acronyms and terms, and a list of references are found at the end of the manual.

How to tell what is mandatory from what is being proposed as "best practice"

Italics are used throughout the manual when something mandatory is being described or referred to. The words "shall", "will" or "must" also indicate mandatory language. Mandatory means it is required by the Lanter-man Act or other law or regulation. The reference in law or regulation that makes something mandatory is found in the footnotes.

Instructions or other text in normal type represents current best practice. These best practices are consistent with and supplement what is mandatory. The words "may", "can" or "should" indicate best practice, as opposed to mandatory action.

If you have questions . . .

If you have questions or comments about this material, please contact:

IPP Materials Coordinator
Department of Developmental Services
Community Operations Division
Regional Centers Branch
P.O. Box 944202
Sacramento, CA 94244-2020

Phone: 916/654-1954 FAX: 916/654-3641

For information about the Department of Developmental Services programs and services, please call 916/654-1897, or visit our Internet Home Page: www.dds.ca.gov

Person-Centered Planning

Person-centered planning, for the purposes of this manual, is an approach to determining, planning for, and working toward the preferred future of a person with developmental disabilities (a consumer¹³) and her or his family. The preferred future is what the person and family want to do in the future based on their strengths, capabilities, preferences, lifestyle and cultural background. Personcentered planning is a framework for planning and making decisions. It is not a collection of methods or procedures. Person-centered planning is based on an awareness of, and sensitivity to the lifestyle and cultural background of the consumer and family. 14



Person-centered planning is an approach to determining, planning for and working toward the preferred future.

^{13.} For the remainder of this manual, the term consumer will include the consumer, and where appropriate, the authorized representatives of the consumer. "Authorized representative" means the conservator of an adult, the guardian, conservator, or parent or person having legal custody of a consumer who is a minor, or person or agency authorized in writing by the claimant or by the legal guardian, conservator, or parent or person having legal custody of a minor claimant to act for or represent the consumer (Welfare & Institutions Code Section 4701.6).

^{14.} Welfare & Institutions Code Section 4646.5(a)(1)

The preferred future

The preferred future of consumers and their families is determined by finding out what their *life goals, capabilities and strengths, preferences, barriers, and concerns or problems* are. When consumers describe where and with whom they want to live, who they want to socialize with, how they would like to spend their time, what jobs they want to have, and other aspects of their daily lives, they are describing their preferred future. Observing those who have difficulty with language will provide an indication of their capabilities, strengths, preferences and concerns or problems. Asking those who know a consumer well can also provide the necessary information.

The needs, barriers, concerns and problems experienced by a consumer are identified in this person-centered process, but only as they relate to the goals, capabilities, strengths and preferences of the consumer and family. Procedures, such as diagnosing the consumer and listing the deficits and needs that led to that diagnosis, and prescription of activities intended

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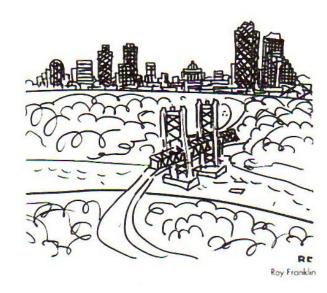
to remedy the condition described by the diagnosis, do not fill the requirement for providing a planning process that is centered on the person and family.

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Welfare & Institutions Code Section 4646.5(a)(1)

Welfare & Institutions Code Section 4502(j)

Although knowledge and expertise are respected and valued, planning that is prescribed and controlled by others without respect for the choices made by consumers and families is not person-centered. In an approach to planning that is focused on the consumer and family, members of the planning team adopt the role of consultants or advisors who help the consumer and family achieve their preferred future.



Ongoing planning

Person-centered planning assists consumers and their families to build their capacities and capabilities. This planning effort is not a single event or meeting, but a series of discussions or interactions

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among the consumer, family, service coordinator¹⁷ and others. This group of people is called a planning team.

^{17.} The service coordinator may be an employee of the regional center or may be a qualified individual or employee of an agency with whom the regional center has contracted to provide service coordination services (Welfare & Institutions Code Section 4647[b]). Where appropriate, a consumer or the consumer's parents or other family members, legal guardian, or conservator, may perform all or part of the duties of the service coordinator . . . if the regional center director agrees and it is feasible (Welfare & Institutions Code Section 4647[c]).

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The planning team must include the consumer (and family when the consumer is a minor child¹⁸), and the service coordinator: In addition to the service coordinator, other representatives of the regional center may also function as planning team members. When invited by the consumer, others may join the planning team.¹⁹

Consumers and families must be able to communicate effectively with other members of the planning team. For consumers who experience difficulty in communication, that may mean that a facilitator of the consumer's choosing should also be a member of the planning team. ²⁰ If all of the members of the planning team do not share the same language, an interpreter or translator is necessary. ²¹ The size and composition of the planning team should be arranged to meet the communication needs

and preferences of the consumer and family. The essential feature is that the information exchanged among the members of the planning team must be exchanged in a form that is understandable to the consumer and family.²²

Consumers and families must be able to communicate effectively with other members of the planning team.

Whenever possible, relevant

information should be exchanged among members of the planning team before planning conferences are held. For example, written reports of professional assessments should be given to the consumer and family prior to the planning conference where the assessments will be discussed.

^{18.} Welfare & Institutions Code Sections 4646(b) & 4685

^{19.} Welfare & Institutions Code Section 4646(d)

^{20.} Welfare & Institutions Code Section 4648(a)(12)

^{21.} California Code of Regulations, Title 22, Sections 98210(a) & 98211(c)

^{22.} Welfare & Institutions Code Section 4502.1

In some cases, consumers will benefit from tangible forms of information. For example, it may be necessary to assist the consumer to visit other types of work or living environments prior to a planning conference where a change in these areas will be discussed. It is important for planning team members to identify the issues that may need to be addressed in a planning conference before the conference so that there are no "surprises" during the conference.

The planning conference

The planning team will periodically review the consumer's IPP in a manner agreed to by the planning team. This review will include discussion of the consumer's achievements and needs, approximate scheduled start date and time lines for actions necessary to begin services and supports, and determining whether previously scheduled services and supports have been delivered as planned. Services and supports are expected to be effective in meeting the goals stated in the IPP, reflect the needs, preferences and choices of the consumer, and reflect the cost-effective use of public resources. As defined in regulation, cost-effectiveness means obtaining the optimum results for the expenditure.

These reviews are scheduled often enough to meet the needs of the consumer and family, but not less often than once every three years. These meetings are called planning conferences. Planning conferences provide a snapshot of the planning process at a point in time. They allow the planning team to evaluate the effects of the scheduled services and supports in moving the consumer (and family, as appropriate) toward the preferred future, and to decide what modifications to the IPP are needed.

^{23.} Welfare & Institutions Code Section 4646.5(a)(4), (5) & (b)

^{24.} Welfare & Institutions Code Section 4646(a)

^{25.} California Code of Regulations, Title 17, section 58501(a)(6)

^{26.} Welfare & Institutions Code Section 4646.5(b)

The decisions made by the planning team during planning conferences are made jointly. Decisions concerning the consumer's services and supports purchased by the regional center shall be made by agreement between the regional center representative and the consumer; or where appropriate, the parents, legal guardian, conservator or authorized representative at the program plan meeting.²⁷ The plan

The decisions made by the planning team during planning conferences are made jointly. Collaboration, cooperation and mutual respect among the members of the team are essential to this joint decision-making process.

must be signed by the consumer; or where appropriate, his or her parents, legal guardian, or conservator; and a regional center representative prior to the plan's implementation. This means that team members share information freely with each other, and attempt to agree among themselves as to the best course of action to achieve the preferred future for the consumer and family. Collaboration, cooperation and mutual respect among the members of the team are essential to this joint decision-making process. In those instances where agreement cannot be reached, another meeting shall be held within 15 days. The consumer and family shall be

informed verbally, and shall be notified within five days, ³⁰ in writing, in a language, which they comprehend, of their right to a fair hearing. ³¹

Planning conferences provided a snapshot of the planning process at a point in time.

^{27.} Welfare & Institutions Code Section 4646(d)

^{28.} Welfare & Institutions Code Section 4646(g)

^{29.} Welfare & Institutions Code Section 4646(f)

^{30.} Welfare & Institutions Code Section 4646(b)

^{31.} Welfare & Institutions Code Section 4705(d)

Disagreement shall no prohibit implementation of the agreed upon services and supports.³²

At intake, the regional center shall also inform the consumer and family of the advocacy services available through the local area board and the nearest office of Protection & Advocacy, and shall provide the addresses and telephone numbers of those agencies.³³

The written IPP

The planning conference results in a written IPP that documents the choices and decisions made by the team using person-centered methods.

Completion of a written IPP, however, is not the outcome of personcentered planning. While the planning team is responsive to the needs of funding and service agencies for complete and accurate information, the needs of these agencies should not prevent the team from centering their attention and activities on the consumer and family.



Artwork reprinted by permission of Martha Perske: Pencil Portraits 1971-1990. (Nashville: Abingdon Press)

The written IPP contains goals and objectives based on the needs, preferences, and life choices of the consumer and family.³⁴

It also contains a approximate scheduled start dates and time lines for actions necessary to begin services and supports, a scheduled of the type

^{32.} Welfare & Institutions Code Section 4646(g)

^{33.} Welfare & Institutions Code Section 4646(c)

^{34.} Welfare & Institutions Code Section 4646.5(a)(2) & (3)

and amount of services and supports to be purchased by the regional center or obtained from generic resources or other resources in order to achieve those goals and objectives, and a list of those responsible for providing the services and supports. The consumer and family shall have input to the selection of these providers.³⁵

During the planning conference, the service coordinator will keep notes to ensure that what was agreed to is reflected in the written IPP. At the end of the planning conference the team will review and agree upon what was decided, and who is responsible for the next steps.

There may be some issues remaining at the end of the review that require further consideration or investigation before they are jointly agreed to. Those remaining issues will be considered by the planning team as a whole after the necessary information is available. This may result in additional review by the planning team. *If agreement cannot be reached at the meeting, a second meeting must be scheduled within 15 days. Additional meetings may be held if the team agrees* ³⁶. The team may also agree to a range of alternative solutions to some remaining issues and delegate the choice among those agreed-upon alternatives to the service coordinator.

While handwritten IPPs are permitted, they are usually typed some time after the planning conference to make them easier to read. When the written IPP is typed after the planning conference, the typed IPP should be distributed to the members of the planning conference within 45 days after the planning conference.

Whether handwritten or typed, the final IPP must be prepared in a form that is understandable to the consumer and family. If the consumer or family needs interpretation or translation services to fully participate in

^{35.} Welfare & Institutions Code Section 4646.5(a)(4)

^{36.} Welfare & Institutions Code Section 4646.5(a)(4)

^{37.} Welfare & Institutions Code Section 4502.1 and California Code of Regulations, Sections 98210(a) & 98211(c)

the development of the IPP, or to understand the written IPP, the regional center shall provide translation or interpretation services as appropriate. ³⁸ The consumer; and/or family, shall sign the IPP prior to its implementation. ³⁹

Whether handwritten or typed, the final IPP must be prepared in a form that in understandable to the consumer and family.

Those portions of the final written IPP that require specific services should also be given the appropriate service providers. The entire IPP may be distributed to each service provider involved, with the permission of the consumer.

Working toward the preferred future

Planning does not stop when the planning conference is completed. Members of the planning team continue to have informal discussions and interactions. These provide opportunities to monitor progress, and make minor adjustments to planned activities that are consistent with the selected goals and objectives. Providers of service and support engage in the activities they have agreed to, and keep the planning team members informed.

Claifornia Code of Regulations, Title 22, Sections 98210(a), (c), (d) & 98211(c)

Welfare & Institutions Code Section 4646.5(a)(4)